

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/	/				
2	/	/				
3	/	/				
4	/	/				
5	/	/				
6	/	/				
7	/	/				
8	/	/				
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21			/	/		
22			/	/		
23			/	/		
24			/	/		
25			/	/		
26			2	2		
27			/	/		
28			/	/		
29			2	2		
30			2	2		
31			2	2		
32			2	2		
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47						
48						
49						
50						
TOTAL IND.	6	↓	2	↓		↓
TOTAL DEP.	18	←	18	←		←
TOTAL CLAIMS	24		20			

  

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS